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ABSTRACT

Adolescent parents are unprepared for parenthood. Their lack of preparedness places their children at risk for maltreatment. This educational program was designed to enhance the parenting skills of adolescent mothers thereby reducing the risk for maltreatment among their children. This parenting skills training program consisted of six weekly sessions focused on: (1) child development from birth to age 2; (2) positive reinforcement techniques; (3) discipline techniques; (4) cognitive restructuring techniques; and (5) problem-solving techniques. An evaluation component was developed and administered to pregnant and parenting students. The results of this program were mixed. Analysis of the data revealed that although the students indicated that the program was helpful to them and that they felt they had the skills necessary to be a good parent, only 38 of the 58 students were able to give appropriate responses as to how they would handle problematic situations without using corporal punishment. The results in the areas of empathy and positive reinforcement techniques were positive. It is recommended that program length be increased from 6 to 18 weeks; that students missing classes should receive handouts; that the program should be run at all sites; and that children in daycare should be videotaped so that students could learn from observation. (Author/ABL)

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Reducing the Risk for Child Abuse by Developing and Implementing a Parenting Program for Teenage Mothers

by

Patricia Doetsch

Cluster XXII

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A Practicum (II) Report Presented to the Ed.D. Program
In Early and Middle Childhood
In Partial Fulfillment of the Requirements
for the Degree of Doctor of Education

NOVA UNIVERSITY

1990

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PRACTICUM APPROVAL SHEET

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This practicum report was submitted by Patricia Doetsch under the direction of the adviser listed below. It was submitted to the Ed.D. Program in Early and Middle Childhood and approved in partial fulfillment of the requirements for the degree of Doctor of Education at Nova University.

Approved:

May 31, 1990
Date of Final Approval of Report

Wanda M. Slayton, Ph.D.
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Patricia Doetsch

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ABSTRACT

Reducing the Risk for Child Abuse by Developing and Implementing a Parenting Program for Teenage Mothers. Doetsch, Patricia, 1990: Practicum Report, Nova University, Ed.D. Program in Early and Middle Childhood.
Descriptors: Child Abuse/Teenage Pregnancy/Pregnant Students/ Parenthood Education/Parenting Skills/Child Rearing.

This practicum was designed to provide an educational program that would enhance the parenting skills of adolescent mothers thereby reducing the risk for maltreatment among their children.

The writer developed a parenting skills training program that consisted of six weekly sessions that focused on: (a) child development from birth to age two, (b) positive reinforcement techniques, (c) discipline techniques, (d) cognitive restructuring techniques, and (e) problem-solving techniques. An evaluation component was developed and administered to pregnant and parenting students.

The results of this practicum were mixed. Analysis of the data revealed that although the students indicated that the program was helpful to them and that they felt they had the skills necessary to be a good parent, only 38 of the 58 students were able to give appropriate responses as to how they would handle problematic situations without using corporal punishment. The results in the areas of empathy and positive reinforcement techniques were positive.

CHAPTER I

INTRODUCTION

Description of Community

This writer is a social worker with a teen parent program in a large metropolitan school system in the southeast. This school system serves approximately 600 pregnant and parenting teenagers annually.

The pregnant teens and new mothers range in ages from 12 to 21. The majority of them reside in low income areas of the county. Most students qualify for free breakfast and lunch. The preponderance live in single-parent homes headed by their mother. Many of the students' mothers were also teen mothers.

The school system provides three teen parent programs, one in the north, central, and south area of the county. Starting in the 1988-89 school year all three programs will provide a day care facility on campus. Over the past two years a day care facility has been added to each program. Funding is provided through a state dropout prevention grant in addition to local school board funding. The school system furnishes bus transportation for the students and their babies. The buses have been equipped with seat belts to accommodate child restraint seats. When the student signs up for

day care she is assigned a child restraint seat appropriate for her child.

Pregnant students who have medical complications associated with their pregnancy or delivery may be eligible for the Cyesis Homebound Program. The student must provide medical documentation of complications which would prohibit her from attending school for three or more weeks. Once she and her physician complete the required paperwork she is assigned a Homebound teacher. The Homebound teacher provides instruction in the student's home in order that the student can continue to earn academic credit during her absence from school.

Author's Work Setting and Role

This writer is a social worker with six years experience counseling pregnant and parenting teenagers. Her educational backround is a bachelor of arts degree from Duke University with majors in psychology and sociology, and a master of social work degree from Florida State University with curriculum emphasis in individual, family, and group counseling.

Her role is to help pregnant and parenting students remain in school. This writer explains to pregnant teens their educational options. The student can stay in her

home-based school during her pregnancy and after her recovery if she and her family think that is best for her. The student can transfer to the school for pregnant teens anytime during her pregnancy. If she requires day care for her baby she can transfer to the school for pregnant teens after she delivers, if she so desires.

This writer is assigned to the central area school for pregnant teens. At the central area site, students who do not require day care will have to return to their home school after a reasonable post-partum period. The other two sites are larger and can accommodate as many pregnant and parenting students who choose to attend their programs. However, at different times during the school year the day care facilities become full. Over the past two years the day care facilities have been able to expand due to the acquisition of county grant monies. The central area day care facility will open in the fall with a capacity of 25 infants and toddlers.

According to annual county school board statistics for the 1987-88 school year, 243 pregnant teenagers were referred to the central area program for pregnant teens. Of the 243, 104 enrolled in the teen parent program, and 136 remained in their home school. It is expected that

many more will choose to attend the program with the addition of the day care facility. It is this writer's responsibility to counsel the pregnant and parenting students in both the home-based schools and at the central area center for pregnant students on an individual or group basis in the areas of nutrition, child care, family planning, social service needs, and other personal issues of importance to the students.

CHAPTER II

STUDY OF THE PROBLEM

Problem Description

Adolescent parents are unprepared for parenthood. Their lack of preparedness places their children at risk for maltreatment. According to annual county school board statistics for the 1987-88 school year, 602 pregnant teenagers were referred to the school system's program for pregnant teens. Their ages ranged from 12 to 21. These adolescent mothers had little experience as caregivers and little knowledge of what the role of caregiver entailed.

Of the 602 pregnant teenagers referred to the program, 329 enrolled in the teen parent program in their area. All of these students were enrolled in a one semester home economics course which included child development. Two hundred seventy three pregnant teenagers remained in their home schools and were not required to take any special classes. The school system provided no systematic training for teen mothers either in the centers or in the home schools to prevent child abuse.

The school system's programs had focused mainly on the pregnant teenager rather than the teen mother. With

the addition of the day care centers the emphasis needed to be expanded. The central area had provided little support to the teen mother. After the teen recupperated and was able to return to school, she was expected to complete her school work and return to her home school as soon as possible. During this school year, with the opening of the day care center, more than 25 teen mothers were able to continue their education at the center. These students had the opportunity to take advantage of the individual and group counseling that was provided at the center. At that time no plans had been made to expand either the home economics curriculum nor the group counseling program to include the increasing needs of the teen mothers.

Briefly stated, the problem was that children born to teen mothers were at risk for maltreatment. The teen parent programs had focused on keeping the pregnant student in school. To some extent the programs had tried to provide supportive counseling to new mothers but there had been no systematic training for pregnant nor parenting teens to prevent child abuse and neglect.

Problem Documentation

In order to document the problem, this writer interviewed individuals in the community who were familiar with teen mothers and the problem of child maltreatment (M. Johnson, personal communication, July 13, 1988; C. Woerner, personal communication, July 19, 1988; N. Hansen, personal communication, July, 15, 1988; K. Tripp, personal communication, June 30, 1988).

Mary Johnson, social worker with the Children's Diagnostic and Treatment Center, worked with many teen mothers and their children. Mrs. Johnson worked with babies who had been identified as developmentally delayed. She found that many teen mothers had little or no experience with babies. She said many teen mothers did not even know how to hold a baby, and much less what to do when a baby was irritable. Her program sent a caseworker to the home to help the parent work with the child at home. The parent also brought the child to the office where Mrs. Johnson and other social workers worked with the family. Mrs. Johnson said that the main problems she saw with teen mothers that placed their children at risk for maltreatment were their lack of knowledge of general child care and their inability to deal with stress.

In an interview with Cathy Woerner, social worker with the school system's teen parent program responsible for group counseling at all three centers, Ms. Woerner expressed her concerns with the teen mothers' ability to parent effectively. She explained that due to the level of immaturity and limited life experiences, adolescent mothers typically did not possess effective parenting and coping skills. Basically, they did not know what to expect of young children. Many students expressed their lack of knowledge and their concerns about being a good mother during counseling sessions. Many realized they needed help and support to handle their new role as parent. Ms. Woerner admitted that the new mothers needed more education and support than she was able to give in her weekly group sessions.

Nina Hansen, child abuse and neglect coordinator for the central area of the school system, explained that their office received child abuse and neglect referrals from school personnel on young children whose parents were teenagers when the children were born. She said there was a high incidence of child maltreatment among parents who were teenagers when they had their children. According to Mrs. Hansen many factors place these parents at risk for mistreating their children: lack of appropriate expectations about normal child

behavior, lack of bonding due to multiple caregivers, limited care and responsibility for the child during the early years due to the availability of other caregivers, lack of understanding of the responsibilities involved with caring for a child on a daily basis, and resentment at their situation --lack of freedom, lack of financial resources, lack of options for the future.

In an interview with Karen Tripp, marriage and family therapist and teacher of intensive parenting skills to abusive parents, Mrs. Tripp expressed the need to work with parents before they became abusive. Mrs. Tripp's students were court ordered to class as part of their treatment, and often as a stipulation for their reestablishing custody of their children. She explained that there were many parents who had such severe problems with their children that they would not even come to class. They had given up. These parents had made the decision that they did not want to try to get their children back. The main problem Mrs. Tripp saw with abusive parents was their inability to see things from their child's perspective. They saw things from their own point of view and assigned motivations to the child that were not consistent with how a child might think and behave. Mrs. Tripp said she rarely worked with adolescents but would see adolescents as having a

very difficult time empathizing with a young child.

These interviews with experts in the fields of teenage pregnancy and child abuse served to document the problem of child maltreatment among teen mothers. Teen mothers needed special help in dealing with their role as parent. They needed knowledge in the area of child development as well as practical information about what types of behavior to expect of their children and how to deal with these behaviors. Professionals who worked with teen parents clearly saw a need for more parenting skills training for pregnant and parenting teenagers.

Causative Analysis

Over the past several years the number of pregnant teenagers referred to the school system's program had increased dramatically. According to school board statistics for the 1986-87 school year 464 pregnant students were referred. In 1987-88 the number increased to 602, and in the 1988-89 school year the total number of referrals was 661. As the number of pregnant teens increased, more attention was focused on their problems. The school system had added two programs with day care services with the purpose of helping pregnant and parenting teens complete their education.

The school system's emphasis was on dropout prevention. Most of the attention was placed on keeping pregnant and parenting teens from dropping out of school.

The school system employed four social workers to work with pregnant and parenting students. With the increasing numbers of pregnant students each year, the social workers spent very little time working with the previous school year's new mothers. These new mothers required special attention, and at that time their needs remained unmet. Because their needs remained unmet, their children were risk for maltreatment.

Besides the lack of attention paid to young mothers' needs, there were many reasons why young mothers were considered at risk for abusing their children. One reason was the teenage parent's lack of knowledge about age appropriate behavior in infants and children. They typically expected children to be able to do things that the children were developmentally unable to do. Teenage mothers attributed motivations to the child's behavior that were inconsistent with the child's developmental stage.

Another reason why children of teenage mothers were at risk for abuse was the teenager's lack of knowledge of discipline techniques. Teenage parents saw limited options for disciplining their children. Their

narrow repertoire included yelling at the child, belittling the child, and corporal punishment. The teen parent's first response for a child's misbehavior was often to spank the child. They needed to learn how to reorganize the child's environment in order to prevent the child from getting into trouble, in addition to learning what to do when the child misbehaved.

The teenage mother's lack of maturity and experience in dealing with stressful situations placed her at risk for mistreating her child. Teenagers were still developing themselves. It was very difficult for them to take on the responsibility of the development of another person. They had unrealistic expectations about what taking care of a child entailed. Very few teenagers have had the responsibility of taking care of a child for an extended period of time. When they experienced the strain from the lack of sleep and the added responsibilies it came as a shock. They lacked confidence in their role as parent. Nothing in their past experience could compare with the responsibility of being a parent. In addition, the other pressures of being an adolescent were still there. Only now, the new mother had a baby and may be feeling that she did not fit in with her friends anymore.

In reality, many teen mothers felt isolated. They

had changed. Their situation had changed. Their free time was severely limited by their additional responsibilities. Teen mothers often felt they did not have that much in common with their old friends, and they had very little time to cultivate new friendships. The teen mother was often isolated from her family as well. The family focused its attention on the baby's emotional and financial needs, often to the exclusion of the teen mother's needs. Teenage mothers often felt isolated from their family and friends when they intensely needed their support.

There were many reasons for the teenage mother's increased risk for child maltreatment. The teenage parent lacked knowledge in the areas of child development and child rearing. Teenagers were still developing themselves and lacked the resources necessary to deal with the added responsibilities of parenthood. They had limited experience in and knowledge of the daily routine of caring for a child's physical and emotional needs. In addition, they were isolated from friends, family, and resources that they desperately needed at this time in their lives.

The Related Literature

The research clearly showed that teenagers were high risk mothers who produced high risk children, and that one of the risks faced by the children was that of maltreatment. Each year the number of teenagers becoming pregnant increased (Bell, Casto, Daniels, 1983; Melkle, Peltchinis, & Pierce, 1985, cited in Bennett & Morgan, 1988; Schinke, Gilchrist, & Small, 1979). In 1985, 477,700 girls 19 or younger gave birth. There were 178,009 births to girls 17 or younger, and 10,220 to girls younger than 15 (Pittman & Adams, 1988). Although the birth rate among teens had decreased slightly, the birth rate among unmarried teens had continued to increase (Pittman & Adams, 1988). Teen pregnancy brought consequences to the teenager herself, her family, her child, and society. Consequences for the teen mother included increased risks for prenatal and postnatal complications, school failure, reduced job opportunities, poverty, and dependence on welfare (Allen & Pittman, 1986; Phipps-Yonas, 1980; Pittman & Adams, 1988; Spencer, 1985). Consequences for the child included increased risks for prematurity, low birth weight, infant mortality, cerebral palsy, mental retardation, physical handicaps, and infant and

childhood injuries (Anastasiow, 1983; Bauch, 1981; Bell, Casto, & Daniels, 1983; Phipps-Yonas, 1980; Schinke, Gilchrist, & Small, 1979; Spencer, 1985). In addition to this long list of risks, the child of a teenage mother was also at risk for maltreatment (Bolton, Laner, & Kane, 1980; Colletta, 1981; Miller, 1984; Phipps-Yonas, 1980).

In a recent study of reported cases of child maltreatment Bolton, Laner, and Kane (1980) found that there was a higher incidence of reported maltreatment of children born to adolescent mothers. They reported that 36.5% of the total number of officially reported cases they studied involved a mother who was an adolescent or had been an adolescent at the time of at least one of her children's births. The percentage was slightly higher, 37.5% for substantiated cases of child maltreatment involving an adolescent mother. The researchers also found that the child born during the mother's adolescence was at greater risk for child maltreatment than subsequent children born to these mothers as they grew older. These percentages represented a disproportionately high incidence of reported child maltreatment among adolescent mothers.

Colletta (1981) studied the relationship between social support and the risk of maternal rejection by

adolescent mothers. She reported that very young mothers were at high risk for maltreatment of their children due to their inability to deal with the stress associated with their situation. Young mothers were forced to cope with childcare responsibilities, limited resources, and disruption of peer relationships. Many were forced to drop out of school, leading to underemployment, poverty, and increased social isolation. Colletta reported that adolescent mothers had been described as "impatient, insensitive, irritable, and prone to physical punishment with their children" (p. 192). The author's interest was in finding out why some adolescent mothers were able to overcome these obstacles and become competent mothers. She hypothesized that there would be a negative correlation between maternal rejection and social support. The results of the study showed this to be true. She found an inverse relationship between maternal rejection and the total amount of support. The author concluded that a supportive social environment was imperative to reduce the risk of maternal rejection.

There were many factors that worked together that resulted in child abuse and neglect (Garbarino & Gilliam, 1980). Some of the factors mentioned in the

child abuse literature that were found to lead to maltreatment were stress, social isolation, and lack of competence in the role of caregiver (Garbarino & Gilliam, 1980; Kempe & Kempe, 1978). Parents who mistreated their children were often mistreated as children. They had little knowledge of what behaviors to expect of children (Garbarino & Gilliam, 1980). Kempe and Kempe (1978) explained that when a parent had unrealistic expectations of a child, coupled with the idea that physical punishment was the way to teach a child to behave, abuse was likely to occur.

A steadily increasing amount of attention had been devoted to the study of adolescent pregnancy and its consequences. Researchers had identified the adolescent mother as being at greater risk for child maltreatment. Adolescent mothers were at increased risk for child maltreatment because of their limited resources, reduced opportunities for employment, limited education, social isolation, and relationship stresses. Even though young mothers must cope with these realities, the majority do not mistreat their children. There was no denying the fact that teenage mothers had many obstacles to overcome in the raising of their children. With the help of an educational program

designed to build parenting skills, the teenage mother's risk for child maltreatment would be reduced.

CHAPTER III

ANTICIPATED OUTCOMES AND EVALUATION INSTRUMENTS

Statement of General Goals

The general goal of this practicum was to provide an educational program that would enhance the parenting skills of adolescent mothers thereby reducing the risk for maltreatment among their children.

Behavioral Expectations

The following objectives were projected for this practicum:

1. Given a problem situation, 48 of the 60 students involved in the training would be able to give an appropriate response as to how they would handle the problematic situation, excluding forms of physical punishment.

Evaluation tool: Post-test.

2. Given examples of child behavior, 48 of the 60 students involved in the training would be able to state which behaviors were age appropriate and which behaviors were not age appropriate.

Evaluation tool: Post-test.

3. Given examples of child behavior, 48 of the 60 students involved in the training would be able to state three possible reasons for the child's behavior.

Evaluation tool: Post-test.

4. Given examples of child behavior, 48 of the 60 students involved in the training would be able to give at least three examples of positive reinforcement that would be appropriate for the situations described.

Evaluation tool: Post-test.

5. Fifty-four of the sixty students involved in the training would report they had the skills necessary to be a good parent.

Evaluation tool: Survey.

Evaluation Instruments

This writer designed four written post-tests and a survey for the purpose of measuring the objectives outlined in the previous section. The tests were adapted from exercises and quizzes used by Ryan (1983), Tripp (1988), and Valentine-Dunham and Gipson (1980). The students had five to ten minutes at the end of the session to complete the post-test. During the final session students were asked to explain how they would

handle a problematic situation shown on a videotape. The last session concluded with a survey designed to determine what the students find to be most helpful about the program, and how they felt about their skills as parents.

The evaluation tools used were:

1. A written post-test was given at the end of Session II testing the students' knowledge of age-appropriate behaviors for children between the ages of 3 weeks and 2 years. The students were asked to circle either "age-appropriate" or "inappropriate" in response to 10 questions that identified a child's age and a behavior or ability that might be appropriate for a child of that age.

2. A written post-test was administered at the end of Session III testing the students' ability to give positive reinforcement in response to something their child had done. The test consisted of five examples of desirable behavior. The students were asked to fill in what they would say and do in response to the child's behavior.

3. A written post-test was given to the students at the end of Session IV in order to determine their ability to understand why children act the way they do. The students were asked to give four reasons why a child

might behave as described in each of the five scenarios.

4. A written post-test was administered to the students at the end of Session V to determine if they could put the knowledge they had gained about child behavior, positive reinforcement, and discipline to practical use by explaining how they would handle four problematic situations. The students were asked to explain how they would respond if they found themselves in each of the situations described. They were asked not to respond using forms of physical punishment including hitting or spanking.

5. A videotape was shown to the students at the beginning of Session VI in which a child misbehaves and disobeys her mother. The students were asked to describe how they would handle the situation had they been the mother portrayed in the videotape. As the mother they had to handle the situation without resorting to physical punishment.

6. The students completed a survey at the end of Session VI that was designed to determine if they had the skills necessary to be a good parent. The survey questions were in the form of a Likert Scale. In addition to the Likert Scale questions, the students had a space to write in any additional comments they had in response to each question. The final question asked if

the program was helpful to them, and if they had any suggestions for improvements to the program.

CHAPTER IV

SOLUTION STRATEGY

Discussion and Evaluation of Solutions

In recent research in the area of child abuse prevention and treatment Whiteman, Fanshel, and Grundy (1987) reported positive results from a treatment plan that included parental training in problem solving and cognitive restructuring. The program also included relaxation training, however this aspect of the treatment was not found to be effective. The training in problem solving and cognitive restructuring were aimed at reducing parental anger. The authors cited a report by Kadushin and Martin (1981) that found that in 85% of the cases they studied the initial response of abusive parents was anger. The composite intervention of problem solving and cognitive restructuring techniques was successful in alleviating both adult-provoked and child-provoked anger. The findings suggested that an educational program designed to train parents in anger reducing techniques was an appropriate intervention for working with abusive or potentially abusive parents.

Valentine-Dunham and Gipson (1980) designed a a preparent training program as a preventative approach to child abuse for high school students to help them deal with "critical incidents" they might encounter later as parents. The training program consisted of four sessions including the following topics and activities: anger control, rules for praise and reinforcement, rules for ignoring misbehavior, and role-playing what to do in different parenting situations. The results of the training program indicated that high school students could be trained effectively to handle critical incidents they might later experience as parents.

Two other child abuse and neglect prevention programs for foster parents (Ryan, 1983) and abusive parents (Tripp, 1988) focused on parenting skills. Ryan's 10 week program helped foster parents understand how children learn and how different disciplinary techniques effect children's self esteem. This program also helped the parents understand their feelings about discipline by exploring how they had been disciplined as children. Tripp designed a 12 week parenting skills program for parents who had been identified by the state as abusive. In addition to sessions on child development, positive reinforcement, shaping behavior, and problem solving, which were found in both programs,

Tripp's program provided training in recognizing and dealing with anger.

Findings of several studies showed the importance and success of programs that worked with adolescent mothers and their children on parenting and interactional skills (Bennett and Morgan, 1988; Minet, 1985). Bennett and Morgan emphasized the need to teach adolescents how to interact positively with their infants. They reported a study by Widmayer and Field (1980) that concluded that adolescent mothers' parenting attitudes improved when they were shown what their babies were capable of doing.

The research on child abuse prevention clearly demonstrated the positive effects of parent training programs. Successful parenting skills programs included training in child development, positive reinforcement, discipline techniques, problem solving, cognitive restructuring, and anger reduction. These programs had shown their effectiveness with at risk populations including adolescent mothers, foster parents, and abusive parents. An educational program for pregnant and parenting teenagers designed to include the components of successful programs was the solution to the problem.

Description of Selected Solutions

The parent training program for pregnant and parenting teenagers would consist of six sessions. The topics would be:

Session One: Child development from birth to age two.

Session Two: Positive reinforcement techniques.

Session Three: Discipline techniques.

Session Four: Cognitive restructuring techniques.

Session Five: Problem solving techniques.

Session Six: Review and practice.

The subject matter discussed in the sessions would be based on the ideas and training material found in other successful programs (Bennett & Morgan, 1988; Minet, 1985; Ryan, 1983; Tripp, 1988; Valentine-Dunham & Gipson, 1980; Whiteman, Fanshel, & Grundy, 1987). This program would be limited to six sessions in an effort to have as many adolescents as possible complete the program. Many students attended the teen parent programs for only one nine week quarter. Attendance was poor. Even if students were enrolled for a semester, it was rare for a student to be in attendance for six consecutive weeks. Groups with the social workers were held on a weekly basis. Students who missed some

of the sessions would be encouraged to attend a later group so that they may have they benefit of the full program. Sessions would be carried out at some of the home schools where there were ongoing groups for pregnant and parenting teenagers.

For session one the child development theory would be limited to discussion of babies up to age two because most of the girls in the program would have young infants and toddlers. Their concerns would be immediate. They would be interested in finding out how to solve the problems they were encountering now. What they learned in the parenting class would be relevant to their situation.

In session two, they would learn how to praise their child, and reinforce positive behaviors. Session three would be devoted to discipline techniques especially appropriate for the young child. During these two sessions students would learn how to increase desired behaviors and decrease undesirable behaviors. Students would examine their feelings about how they were punished as children, and how they expected to discipline their own child. The objective would be to teach the young parent options to physical forms of punishment.

Sessions four and five would teach teen parents how

to use the child development knowledge they gained from session one to understand why children behave the way they do. Parents would learn to empathize with their child. They would learn to have realistic expectations of their child. The teen mothers would be taught steps in problem solving as defined by D'Zurilla and Goldfried (cited by Whiteman, Franshel, & Grundy, 1987). Session six would be for review and a general practice of the techniques learned over the past five weeks.

The goal of this program was to enhance the parenting skills of adolescent mothers thereby reducing the risk for maltreatment among their children.

Report of Action Taken

The process of implementation began with gathering the information for the session plans. After the information was gathered the session plans were written. Then a meeting was held with the social workers to determine the most appropriate time and locations for the groups to be held. After consultation with the school social workers it was decided to delay the beginning of the group sessions until after the day care facility opened and all of the students and babies were

in attendance. Because the day care facility did not open until the end of October, and November and December are short months it was decided that it would not be possible to begin the groups until second semester. During the intervening months training sessions were held with the two social workers and details were worked out for the composition, dates, times, and locations of the groups.

It was decided that groups would be held at two locations. One group setting would be the program for pregnant teens and the other group setting would be an area high school. The program site would have a middle school group and a high school group. Groups were already in existence at the program site. Groups were not in existence at the high school.

At the high school site students were interviewed by the social worker assigned to that school to determine which students were most appropriate for the parenting group. A list of students interested in participating in the group was compiled. Response was very positive. Students attended three individual sessions prior to entering the group.

It was intended that the group sessions begin with child development, but at the high school it was necessary to delay the child development sessions until

pregnancy issues could be discussed. Two discussion groups were held focusing on feelings about the pregnancy, labor and delivery, and community resources. Students at the program site did not need these preliminary group sessions as they had already been attending group sessions devoted to these topics. They also had the benefit of social work and health department counseling services available to them on an ongoing basis on campus. In addition, the students at the program site already knew each other. At the high school many of the students in the groups did not know each other and they were finding out how helpful they could be to each other.

Once the preliminary meetings were held, Session One: Child Development was convened. It had been planned that child development from birth to age two would be covered in the first session but it became apparent that the students needed much more time devoted to child development. Child development was split into two sessions. Session one covered from newborns up to but not including toddlers. Session two was revised to cover toddlers. Students at both sites received the same revised session topics.

Session one began with introductions (See Appendix A - Session I: Outline.) Each student was asked to

state her name and her due date or her baby's age. Students were then given the child development handouts. These handouts described child development from birth to the toddler months. Particular emphasis was placed on the fact that babies develop in predictable ways but each baby develops at his own pace.

Students were taught that their baby might be doing the things listed on the handout earlier or later than the ages listed for the activities. Students discussed what their baby or a baby they were familiar with was doing at the particular ages being addressed. Questions discussed were:

What kinds of things did your newborn do?

Is it what you expected?

How is it different?

What has really surprised you about your baby?

What would you tell someone about babies who was about to have one that you didn't know until you had one?

Do you remember when your baby first _____?

What kinds of things is your baby doing now?

Is it what you expected him to do at this age?

After the discussion, students went over a handout that described ways to get a baby to stop crying. The session ended with the homework assignment: to pay special

attention to a baby, and write down what he was able to do. Students who had not had their baby yet were asked to observe a baby in the nursery, or observe a friend's baby. The students were asked to bring in their completed homework for discussion next week.

Session two began with introductions and then a review of the homework assignment (See Appendix B - Session II: Outline.) Students discussed their observations. Many remarked that the babies were not able to do as much as they had expected. Several students observed babies other than their own child in order to see how their own child measured up. Observing other children helped the students see that it was normal for a child at eight months to cry when his mother left him, and that he was not crying because he was a spoiled child.

The homework review led to a discussion of spoiling a child, and what to do when a baby seems to be crying because he is spoiled. The students discussed what to do to get a baby to stop crying. Each student was asked to write down five things you could do to get a baby to stop crying.

After the students shared their responses, the students were given a handout on toddlers. The social worker went over the handout and led a discussion on

child development from age one to two. Students shared examples of positive and negative behaviors that toddlers exhibit. After students gave examples of positive behaviors, they were asked what they did to show their approval of these positive things their child was doing. They were asked how they would show their disapproval of negative behaviors, and what they would do to redirect the child into something positive.

The session ended with the students taking the Age Appropriate Behaviors Post-Test and reviewing the answers.

Session three was devoted to positive reinforcement and discipline techniques (See Appendix C - Session III: Outline.) The students learned what positive reinforcement was and how to use it to get their child to do what they wanted him to do. Students made up a list of things that could be used as reinforcement for a child. They were taught how and when to give praise.

After positive reinforcement was covered, the students discussed discipline techniques. They discussed how they felt about using spanking as a form of punishment. The students were told that hitting a child was unacceptable, and that other forms of punishment had to be used. The three discipline

techniques that were covered were ignoring the misbehavior, redirecting the child away from the problem, and time-out. Students discussed situations where each of these techniques would be effective. The session ended with the students taking the Positive Reinforcement Post-Test.

During session four students learned about child abuse, cognitive restructuring, and dealing with anger (See Appendix D - Session IV: Outline.) Students discussed techniques that could be used to calm down when they were angry about something. They discussed what they had done in the past, and what new techniques they would feel comfortable trying.

Students moved on from a general discussion of dealing with anger to a discussion of how to deal with anger directed at their child. All the students identified who they could talk to when they needed help. Most students identified their mother, and many students offered to help each other in cases where outside help was needed, or if the student just felt like she wanted to talk with someone who was experiencing the same behaviors with a similar aged child.

After the discussion of coping skills was completed, the Empathy Post-Test was administered

and the students' responses were discussed.

Session five was devoted to problem-solving techniques (See Appendix E - Session V: Outline.) After the students learned the steps to problem-solving, they were divided into groups of four students and given a problem situation to handle. A spokesperson from each group reported on the solution that group had decided upon. After discussion of all the groups' problems and solutions, the Problem-Situations Post-Test was administered.

The final session began with a brief videotape scenario of a child misbehaving (See Appendix F for Outline of Session VI.) The videotape depicted a preschool age child jumping up and down on the couch at a relative's house. The child did not stop when the mother asked her to quit playing on the couch. The students were asked to write down what their options would be as the mother in that situation, and write down what the advantages and disadvantages were to each of those options. Students then discussed their responses. They were also asked to discuss what steps the mother could have taken prior to going to the relative's home in order to avoid a situation like this one.

At the end of the session students were asked to

fill out the Parenting Skills Survey. Suggestions and comments about the program were solicited.

CHAPTER V

RESULTS, CONCLUSIONS AND RECOMMENDATIONS

Results

The goal of this practicum was to provide an educational program that would enhance the parenting skills of adolescent mothers thereby reducing the risk for maltreatment among their children. Three of the 5 objectives for this practicum were met. Objectives 3, 4, and 5 were met. Objectives 1 and 2 were not met.

Objective 1: Given a problem situation, 48 of the 60 students involved in the training would be able to give an appropriate response as to how they would handle the problematic situation, excluding forms of physical punishment.

The results of the Problem Situations Post-Test indicated that 38 of the 58 students tested (65.5%) were able to give appropriate resonses to the questions. Of the 58 students tested, 13 gave responses that included forms of physical punishment such as spanking the child, popping the child, beating the child, hitting the child, or shaking the child. Four students gave inappropriate answers that included yelling at the

child or promising the child ice cream or a toy if he eliminated the negative behavior. Three students gave no answer to one or more questions.

The results of the videotaped problem situation showed some improvements in the students' responses. Out of 61 students tested, 56 gave appropriate answers. The video problem situation was of a four year old child who was jumping up and down on a couch at a relative's home. The mother asked the child to stop but the child did not stop. The students were asked what they would do next if they were the mother. Most of the students explained that they would ask the child to get down because she was going to hurt herself and that she was not allowed to jump on her own furniture at home. Then, they explained they would either put the child in time out or they would leave the relative's home if the child continued to misbehave. One of the students responded that she would spank the child. Another student said she would grab the child and strap her to her car seat. Three other students gave inappropriate responses that included yelling at the child, bribing the child, or threatening the child with a beating.

The difference in the responses to the two different post-tests might be attributed to the fact that students found it easier to respond to the

question of what they might do when they saw the video rather than when they read the scenarios. It was easier for them to visualize what they would do after they had seen the problem rather than read the problem. Some of the students may have had problems understanding the questions due to their low reading levels. In addition, the situation in the video seemed to lend itself to a time-out solution that some of the written scenarios did not. The two written scenarios that were most likely to elicit physical punishment were the problems that took place where there was no obvious place for time-out, the shopping mall and the beach.

Objective 2: Given examples of child behavior, 48 of the 60 students involved in the training would be able to state which behaviors were age appropriate and which behaviors were not age appropriate.

The results of the Age Appropriate Behaviors Post-test indicated that 42 of the 55 or 76% of the students tested were able to state which behaviors were age appropriate and which were not. This was slightly lower than the 80% objective that was projected. Question number four was not counted in the scoring because students were confused about how to answer it since they were aware that a 15 month old could eat

with a spoon but some students expected that a child of that age could also eat with a fork. The incorrect responses that caused the most concern were question number 7: " A 1 and 1/2 year old child is potty trained." - Age appropriate or Inappropriate, and question number 9: "A toddler knows what is breakable and what is not breakable." - Age appropriate or Inappropriate. Forty-eight percent of the students missed question number 7 and 33% of the students missed question number 9. Both of these questions represented areas of potential abuse if the parent had inappropriate expectations of the child and mistakenly determined that the child willfully soiled his pants or broke something on purpose. The question on potty training was particularly disappointing as this subject was covered on several occasions. Many students said they knew of a child that had been potty trained at eighteen months and therefore they generalized that it was normal, age appropriate behavior for a child of that age to be potty trained.

Objective 3: Given examples of child behavior, 48 of the 60 students involved in the training would be able to state three possible reasons for the child's

behavior.

The results of the Empathy Post-test indicated that 47 of the 58 students tested were able to state at least 3 possible reasons for a child's behavior. The responses to the post test questions showed that the students were able to look at a child's behavior to try to determine why the child acted as he did, rather than look at a child's behavior and determine that the child misbehaved because he wanted to make the parent mad. The students put their knowledge of child development to use when they examined the child's behavior to determine why the child acted as he did.

Objective 4: Given examples of child behavior, 48 of the 60 students involved in the training would be able to give at least three examples of positive reinforcement that would be appropriate for the situations described.

According to the Positive Reinforcement Post-test results, 46 of the 54 students (86%) were able to give at least three examples of positive reinforcement they would use for the circumstance described. Students gave examples of verbal and physical reinforcers. Some of the responses included phrases such as "Momma's big boy!", "Oh, that's great!", and "I like the way you came

when I called you." Students also said they would pat their baby, hug their baby, kiss their baby, or smile at their baby when he did something that they liked.

Objective 5: Fifty-four of the sixty students involved in the training would report they had the skills necessary to be a good parent.

The Parenting Skills Survey data indicated that 57 of the 61 students surveyed reported that they had the skills necessary to be a good parent. The survey question that corresponded to this objective was number one:

1. I know how to deal with my child in most situations.

Ninety-three percent of the students who completed the survey reported that they either agreed or strongly agreed with the statement.

In addition, 59 of the 61 students agreed with the statement "I am a good parent." One student did not answer the question, and one student responded "uncertain."

In summary, the results of this practicum were less than expected. The students did very well in the areas of positive reinforcement and empathy. Students, however, showed they needed more work in the area of

child development, and specifically in being able to recognize age-appropriate behavior in a young child. The post-test results also indicated that some students were not able to give an appropriate response to a problematic situation excluding physical punishment. Many students showed that when faced with a problem situation that could not be handled by a time-out solution, that they were likely to resort to corporal punishment.

Conclusions

From the results of this practicum it can be concluded that this program was a good beginning but needed to be expanded for it to be effective. One of the reasons why the program was not as effective as it could have been was that very few students attended all six sessions. Attendance among the pregnant and parenting teens was extremely poor. Although there were 102 students assigned to the program, the most that ever attended a session was 61 (See Appendix G for complete enrollment figures).

Many students lacked a basic knowledge of child development and it was clear that they needed more than two 50 minute sessions to gain a thorough understanding

of what to expect from young children. This finding concurs with a study done by Iverson (1989). He reported that students attending the Teen Parent Program underestimated the age at which children achieved developmental milestones. Iverson found that there was no significant improvement in their knowledge upon completion of the program, and concluded that greater emphasis needed to be placed in this area.

The students' lack of knowledge of age-appropriate behavior caused them to make critical errors in judgement in handling problematic situations as evidenced by their descriptions of what they would do when confronted with problem behaviors. The number of students who would use corporal punishment could be even greater than those who responded that they would spank, hit, pop, or beat their child because the students knew that were supposed to exclude physical punishment as an answer. Many of the students shared in class that they had been spanked as children and that they felt it was the best way to control a child. Some of the students said that they did not see anything wrong with "giving their child a little pop" if he did something wrong. Although most of the students responded that they would use time-out as a preferred method of punishment, it is hard to know what they will do when they are actually

faced with problematic situations.

It can be concluded that the program was successful in teaching the students how to give positive reinforcement to their child. The program was also successful in getting the students to look at behaviors to determine the reasons why the child behaved as he did.

The results of the Parenting Skills Survey indicated that students felt they were good parents. Most said they knew how to control their anger and that they knew where to go for help when they needed it. All of the students agreed that the program was helpful to them.

For this program to have an impact on the problem of child abuse, greater emphasis must be placed on child development. Students must be in attendance for the sessions on child development and age-approriate behavior. The findings are particularly promising in the areas of empathy, positive reinforcement, and anger reduction.

In summary, the results of this practicum indicate that students benefit from a parenting program that emphasizes child development, problem solving, anger reduction, positive reinforcement and discipline techniques. An expanded program is needed to reduce the

risk for maltreatment among children born to teen mothers.

Recommendations

The recommendations for other persons who want to duplicate this program are:

1. Expand the program length from 6 weeks to a 18 weeks (one semester). The students would benefit from more class time devoted to child development. It would be particularly beneficial to the students if children could be brought into the classroom. It would also be helpful to the students if observations in the daycare center could be set up for them to observe children of the ages being discussed. Through daycare observations the students could learn first-hand what typical behavior was for that particular age group; and they could observe trained personnel dealing successfully with problem situations.

With the additional sessions more time could be devoted to class discussions. Students found it very helpful to ask how others had handled different situations they encountered with their children. Students who had already been through earlier stages with their children were good resources for the other

students.

2. Students who missed class sessions would receive handouts from the class. A workbook that included class handouts and assignments would be helpful to the students, especially when they were out of school for six to eight weeks following delivery. Those students who missed more than three sessions or scored poorly on the post-tests would be encouraged to repeat the program the following semester.

3. The program should be run at all the sites during the semester so that if a student transferred she could pick up the program at her new location.

4. Videotaping the children in the daycare center should be explored so that students who remained in their home school could learn from daycare observations on videotape since they would not have access to observations on campus.

Dissemination

The results of this praticum are being shared with a committee that is planning a comprehensive program for pregnant and parenting students. This committee is up of teachers, social workers, counselors, and school administrators who are interested in designing a program that will meet the needs of parenting teens. The committee plans to design a program that will be a year in length and will begin next fall across the county. It is hoped that sessions from this practicum will be included in the social work component of this comprehensive program.

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RESOURCE MATERIALS

Handouts designed from the following sources:

Department of Health and Rehabilitative Services. (1987). What every parent needs to know. (HRS/PL 175-42). Tallahassee, FL: Author.

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APPENDIX A

SESSION I: OUTLINE

Session I : Outline
Child Development

1. Introductions

   Each student states her name and due date or her baby's age.

2. Discussion of Child Development Handouts

   Explanation of development and milestones - how each baby develops at his own pace.

   Discussion questions related to the handout:

   What kinds of things did your newborn do?

   Is it what you expected?

   How is it different?

   What has really surprised you about your baby?

   What would you tell someone about babies who was about to have one that you didn't know until you had one?

   Do you remember when your baby first_____?

   How did you feel when it happened?

   What kinds of things is your baby doing now?

   Is it what you expected him to be doing at this age?

   How is it different?

3. Handout: "Ways to get a baby to stop crying."

   Discussion: Why do babies cry?

   How does it make you feel when the baby cries?

   What kinds of things work to get your baby to stop crying?

   Ask them to try some of these ideas at home.

4. Homework Assignment.

APPENDIX B

SESSION II: OUTLINE

Session II - Outline
Child Development: Toddlers

1. Introductions

   Each student states her name and due date or her baby's age.

2. Review Homework

   Discussion from students about their observations in order to review child development.

3. Review Handout: "Ways to Get your Baby to Stop Crying."

4. Have them complete worksheet: "Write down 5 things you do to get your baby to stop fussing or crying."

   Have them share ideas.

5. Handout - Child development: Toddlers

   Discussion: What kinds of things are toddlers doing?

   Positive Behaviors: elicit examples

   - What do you do to show your baby how happy you are that he does these things?

   Negative behaviors: elicit examples

   - What do you do to show your disapproval?
   - How do you redirect him into something positive?

6. Age Appropriate Behaviors Post-Test

   Go over responses during class after test.

APPENDIX C

SESSION III: OUTLINE

Session III - Outline
Positive Reinforcement and Discipline Techniques

1. Introductions

   Each student states her name and due date or her baby's age.

2. Discussion of Positive Reinforcement

   How to get your child to do what you want him to.

   The Key: Praise, Smiles, and Hugs.

   Have students make a list of reinforcers.

   Handout - "How to Praise Your Child"

   Elicit examples from students.

      What did your baby do today that you liked?

         examples: Ate breakfast, sat in car seat,
                   helped you dress him, came when
                   called him.

   Practice giving praise.

   STRESS: Remember to pay attention to behaviors you
           want your child to repeat.

3. Discussion of Discipline Techniques.

   How do you see yourself disiplining your child?

   Most of us were spanked by our parents. Hitting
      as a form of punishment is unacceptable. Let's
      look at other ways to discipline your child.

   Handout: "Discipline Techniques"

   Handout: "How to Handle Behavior Problems"

4. Positive Reinforcement Post-Test

APPENDIX D

SESSION IV: OUTLINE

Session IV: Outline
Cognitive Restructuring and Dealing WIth Anger

1. Introductions
2. Comments about results of the Positive Reinforment Post-test
3. Child Abuse Facts from the "What Every Parent Needs to Know..." publication HRS/PL 175-42, 4/87.
4. Telephone numbers including local and state hotlines and crisis lines.
5. Discussion of what to do when you get angry.
   Handout: "Ways to Calm Down"
   What works for YOU?
   Who is there to help you when you feel overwhelmed?
   Sharing -- Students making themselves available to help each other.
6. Discussion of how to cope when your baby does something that makes you angry (Handout).
7. Administer Empathy Post-Test
8. Review Empathy Post-Test

APPENDIX E

SESSION V: OUTLINE

Session V - Outline
Problem-Solving

1. Introductions

2. Instruction in "How to Solve a Problem" (Handout)

3. Break up into groups to try problem-solving

   Problems:

   a. You are at your friend's house and your 15 month old takes the other child's toys away from him. What should you do?

   b. Your 12 month old bites another child at the park. What should you do?

   c. Your 15 month old cries and refuses to stay in the bathtub. What should you do?

   d. Your 19 month old child climbs up on the windowsill so he can pull on the blinds. What should you do?

   e. Your 18 month old takes his diapers off while he is in his crib and soils the bedding. What should you do?

   f. It is 5pm and your 2 month old has been crying for 20 minutes and you don't know why. What should you do?

4. Report by group spokesperson on their problem and solutions

5. Administer Problem-Situations Post-Test

APPENDIX F

SESSION VI: OUTLINE

Session VI - Outline

1. Introductions
2. View videotape of child misbehaving.
3. Students write down what they would do if they were the mother in that situation.
4. Students discuss how the situation on the video could have been avoided.
5. Students discuss what they would do as the mother in that situation in the problem-solving format:

   Mom's Options:

   1.
   2.
   3.

   Option 1. Advantages:
   Disadvantages:
   2. Advantages:
   Disadvantages:
   3. Advantages:
   Disadvantages:

   What will you do if the solution you decide on doesn't work? What is your 2nd plan of action? What is your 3rd plan of action?

3. Administer the Parenting Skills Survey.
4. Ask for suggestions/comments.

APPENDIX G

ENROLLMENT FIGURES

ENROLLMENT FIGURES

TOTAL ENROLLED: 102

Teen Parent Program: 78
Middle school students 47
High school students 31

Local High School: 24

Actually Attended Each Session:

	Teen Parent Program		Local High School	Total
	Middle	High		
Session 1	21	15	24	60
Session 2	19	13	23	55
Session 3	18	14	22	54
Session 4	21	13	23	58
Session 5	23	14	21	58
Session 6	22	15	24	61
TOTAL ENROLLED	47	31	24	102